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PRINCIPAL INVESTIGATOR: Stephen Cozza, M.D.


CONTRACTING ORGANIZATION:  Henry M. Jackson Foundation
                                                   Rockville, MD  20652


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|---|---|
| Stephen Cozza, M.D. | |
| Carol S. Fullerton, Ph.D.; Co-Investigators: Robert J. Ursano, M.D., | 5e. TASK NUMBER |
| David M. Benedek, M.D., James McCarroll, Ph.D., and John H. Newby, Ph.D., M. S.W. | 5f. WORK UNIT NUMBER |
| E-Mail: stephen.cozza@usuhs.edu | |

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The purpose of this study is to understand the recently documented increase in rates of child maltreatment and neglect in the US Army. The project employs a three prong research methodology (using clinical chart reviews, survey methodology of key informants, and demographic community analyses) to: 1) facilitate understanding of the phenomenology of Army child neglect, 2) identify child, parent, and family risk and protective factors that contribute to neglect, 3) identify military community contributions to neglect, including deployment, and 4) identify surrounding community factors that may also contribute risk or protection to child neglect behaviors.

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**INTRODUCTION**

The Deployment Family Stress: Child Neglect and Maltreatment in the U.S. Army study was conducted to identify the effects of child neglect within and around military installations. Data for this study was collected from clinical records at four installations, military personnel and Army Community Service personnel involved with family service programs.

This project proposed to:
1) Study and describe the phenomenology of Army child neglect,
2) Identify child, parent, and family risk and protective factors that contribute to child neglect,
3) Identify military community contributions to child neglect, and
4) Identify surrounding civilian community factors that may contribute risk or protection to child neglect behaviors.

A three-pronged, cross-informing methodology was used to collect information in varying formats at 26 identified Army installation sites within this community sample grouping. This three-pronged methodology included the following approaches:

- Clinical record reviews of substantiated child neglect cases (PRONG A),
- Key informant data collection (PRONG B), and
- Military and civilian community resource and characteristics data collection and analysis (PRONG C).

Key informant data collection expected to elicit information from service members, spouses, military service providers, and commanders, included:

(1) in-person questionnaires conducted at 4 Army installations with particularly high numbers of substantiated neglect cases during the index period,
(2) telephone questionnaires conducted at six additional installations chosen to ensure adequate representation by size of installation, rural/urban, locations (East, West, Midwest), combat / support / training installations and rank distribution, and
(3) internet-based questionnaires at all twenty-six installations identified as meeting criteria for the study.

Clinical record reviews were conducted at the same four Army installations as the in-person questionnaires. Clinical record reviews have provided data on the characteristics of child neglect incidents that were substantiated by a multidisciplinary case review committee at each installation. An examination of military and civilian community resources and characteristics data for all 26 identified installations and their surrounding communities will assist in developing installation profiles of their demographic structure, PERSTEMPO, military function as well as their civilian and military social and resource characteristics. The results will provide an understanding of child neglect phenomena within the U.S. Army and to clarify contributing risk and protective factors at multiple levels within the family and community.

During this year, the primary focus has been on writing and editing a manuscript based on the data analysis completed for Prong A, the clinical record review portion of the child neglect

study. The manuscript captures information assessed from a sample of 397 clinical records from four separate Army sites: Ft. Bragg, Ft. Drum, Ft. Hood, and Ft. Stewart. Edits and rewrites have been made to the methods section, the results tables and figures.

The manuscript in preparation highlights the following from the analyzed data:

- The number of child neglect incidents experienced by children with parents serving in the military.
- A description of the neglected child, offender, event and family.
- Common sources of cases referred to the Army Family Advocacy Program.
- Child neglect events are classified into 5 types:
  - (1) Failure to Provide for Physical Needs,
  - (2) Lack of Supervision,
  - (3) Emotional Neglect,
  - (4) Moral Legal Neglect, and
  - (5) Educational Neglect.
- Children, offenders, and families are further examined within neglect types.
- Observed characteristics associated with the offenders, children and families are further examined by types of child neglect.
- Findings are discussed with attention to the risk of child neglect in US Army families.

From the data analysis, a correlation has been made between the five identified categories of child neglect and the severity of neglect. Severity ratings have been provided for the subcategories with each of the major headings.

For Prong B, demographic information has been provided, highlighting the diverse populations who completed the installation resource questionnaires. In preparation for manuscript submission to a peer reviewed journal, rewrites and edits have continued this for both Prongs A and B.

**BODY**

Tasks expected as identified in the SOW

1. **Program personnel recruitment and hiring:** No new personnel actions were taken during year five.

2. **Organization and preparation:**

   *Prong A - Clinical Record Review:* Results from the analysis (see Table 1 below) completed have been written and are being prepared for submission to a peer-reviewed journal. Edits and rewrites have been made to the manuscript and are nearing completion.

**Table 1. Child Neglect Categories Endorsed for Index Child**

| Child Neglect Categories* | Total | | Severity Endorsed for Category | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | 1 | | 2 | | 3 | | 4 | | 5 | |
| | n | % | n | % | n | % | n | % | n | % | n | % |
| Failure to Provide Physical Needs | 130 | 32.7 | 28 | 21.4 | 19 | 14.5 | 32 | 24.4 | 48 | 36.6 | 4 | 13.3 |
| Lack of Supervision | 167 | 42.1 | 79 | 44.6 | 44 | 24.9 | 19 | 10.7 | 8 | 4.5 | 27 | 15.3 |
| Emotional Neglect | 163 | 41.1 | 13 | 8.2 | 3 | 1.9 | 27 | 17.0 | 113 | 71.1 | 3 | 1.9 |
| Moral-Legal Neglect | 20 | 5.0 | 9 | 45.0 | 5 | 25.0 | 5 | 25.0 | 1 | 5.0 | -- | -- |
| Educational Neglect | 14 | 3.5 | 5 | 38.5 | 2 | 15.4 | 1 | 7.7 | 2 | 15.4 | 3 | 23.1 |

*If any lower level subcategory is indicated as present, then all higher level categories are considered present as well. Multiple Categories of Neglect can be endorsed for the same Neglect case. Therefore the total percentages for this variable may exceed 100.*

   *Prong B – Key Informant Data Collection:* A descriptive statistical analyses (see Table 2 below) is ongoing and the results will be drafted into a manuscript, to be submitted to a peer-reviewed journal.

**Table 2. Severity Ratings for Child Neglect Subcategories**

| Child Neglect Categories* | Severity Ratings | | | | | | | | | | Total | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 1 | | 2 | | 3 | | 4 | | 5 | | | |
| | n | (%) | n | (%) | n | (%) | n | (%) | n | (%) | n | (%) |
| **I. Failure to Provide Physical Needs** | | | | | | | | | | | | |
| 1. Adequate Food and Nutrition | 4 | (26.7) | 4 | (26.7) | 4 | (26.7) | 1 | (6.7) | 2 | (13.3) | 15 | (2.4) |
| 2. Appropriate Clothing | 8 | (44.4) | 8 | (44.4) | 2 | (11.1) | -- | -- | -- | -- | 18 | (2.8) |
| 3. Shelter | 68 | (65.4) | 27 | (26.0) | 7 | (6.7) | 2 | (1.9) | -- | -- | 104 | (16.3) |
| 4. Hygiene | 11 | (12.8) | 6 | (7.0) | 22 | (25.6) | 46 | (53.5) | 1 | (1.2) | 86 | (13.5) |
| 5. Health Care | 9 | (34.6) | 4 | (15.4) | 9 | (34.6) | 3 | (11.5) | 1 | (3.8) | 26 | (4.1) |
| 6. Dental | 2 | (50.0) | 1 | (25.0) | 1 | (25.0) | -- | -- | -- | -- | 4 | (0.6) |
| 7. Mental Health | -- | -- | -- | -- | 1 | (100.0) | -- | -- | -- | -- | 1 | (0.2) |
| **II. Lack of Supervision** | | | | | | | | | | | | |
| 1. General | 68 | (61.3) | 25 | (22.5) | 10 | (9.0) | 3 | (2.7) | 5 | (4.5) | 111 | (17.4) |
| 2. Environment | 12 | (23.1) | 10 | (19.2) | 3 | (5.8) | 5 | (9.6) | 22 | (42.3) | 52 | (8.2) |
| 3. Substitute Care | 10 | (37.0) | 9 | (33.3) | 7 | (25.9) | 1 | (3.7) | -- | -- | 27 | (4.2) |
| **III. Emotional Neglect** | | | | | | | | | | | | |
| 1. Inadequate nurturance or affection | 7 | (63.6) | 4 | (36.4) | -- | -- | -- | -- | -- | -- | 11 | (1.7) |
| 2. Expected to assume inappropriate level of responsibility | 6 | (100.0) | -- | -- | -- | -- | -- | -- | -- | -- | 6 | (0.9) |
| 3. Not permitted age-appropriate socialization | -- | -- | 1 | (100.0) | -- | -- | -- | -- | -- | -- | 1 | (0.2) |
| 4. Abandonment | 1 | (33.3) | -- | -- | 1 | (33.3) | -- | -- | 1 | (33.3) | 3 | (0.5) |
| 5. Protection From Violence | -- | -- | -- | -- | 27 | (19.3) | 113 | (80.7) | -- | -- | 140 | (21.9) |
| **IV. Moral-Legal Neglect** | | | | | | | | | | | | |
| 1. Moral Legal | 9 | (45.0) | 5 | (25.0) | 5 | (25.0) | 1 | (5.0) | -- | -- | 20 | (3.1) |
| **V. Educational Neglect** | | | | | | | | | | | | |
| 1. Educational Neglect | 5 | (38.5) | 2 | (15.4) | 1 | (7.7) | 2 | (15.4) | 3 | (23.1) | 13 | (2.0) |

**Table 3. Demographics of Prong B participants**

| Adults | American Indian or Alaska Native | Asian | Black or African American | Hispanic or Latino | Native Hawaiian or Other Pacific Islander | White or Caucasian | Other or Unknown | Total |
|---|---|---|---|---|---|---|---|---|
| Male | 6 | 1 | 70 | 22 | 3 | 103 | 17 | 222 |
| Female | 6 | 10 | 205 | 77 | 11 | 436 | 68 | 813 |
| Unknown | 0 | 0 | 1 | 1 | 0 | 1 | 50 | 53 |
| Total Adults | 12 | 11 | 276 | 100 | 14 | 540 | 135 | 1088 |

_Prong C – Community Data Collection:_ The following information is to be analyzed: level of poverty, public assistance, head of household (female), unemployment, age, ethnicity, home ownership, nationality and length of stay in same house. The findings will be included in a manuscript for submission to a peer-reviewed journal.

3. **Program staff training:** Not applicable for year five.

4. **Site approval and planning:** No activities for year five.

**KEY RESEARCH ACCOMPLISHMENTS**

Prong A
- An analysis of the data collected from a total of 397 surveys has been completed; and a manuscript is currently in draft form based on the preliminary results identified from the analyses. Updates were made to the methods section, results tables and figures. An analysis was completed, highlighting the total number of children who were abused based as determined by the five classifications of neglect.

- A comparison has been done to show the impact deployment may have on the rate of child neglect. To support the findings of this study, a review of national and/or large samples from non-military studies has been in progress, with the goal of understanding the differences, if any, between military and civilian populations and child neglect.

- Neglect severity scores have been calculated for the data collected for this portion of the study. Based on the data collected, we have defined characteristics associated with the offender charged with child neglect.

Prong B
- Frequencies have been completed for all 24 installations in preparation for data analysis. Calculations have been completed for all Likert scales to show the mean and standard deviations.

**REPORTABLE OUTCOMES**

Based on the data analysis for Prong A, it has been determined that Lack of Supervision (42.1%) has been identified as occurring most often in military families who have had a family member serve in combat in Iraq or Afghanistan.

It has been determined that 53.6% of the neglect cases reviewed was experienced by males, with 93.1% between the ages of 1 and 12.

From the research collected, the majority of the offenders were civilians (52.1%), under 28 years of age (63.7%), female (54.5%) and the biological parent of the child (90.2%).

**CONCLUSION**

During year five of the study, the team has been diligently analyzing the results of the data collected at each of the four sites for Prong A (Ft. Drum, Ft. Benning, Ft. Hood and Ft. Stewart) and the sites 26 identified sites for Prong B. Pursuant with the statement of work, data analysis has been performed using descriptive statistical analyses for all data. This information has been used to create data tables and is being used in preparation for a manuscript that will later be submitted to a peer-reviewed journal for publication.

We foresee the following activities for the upcoming year.

1.  **Program Personnel and Hiring:** None anticipated.

2.  **Organization and preparation:**

    A 6-month no-cost extension was approved, extending the period of performance to finalize manuscript development and submission for all prongs of the study (Prong A: Clinical Record Review, Prong B: Key Informant Data Collection, and Prong C: Community Data Collection).

3.  **Program staff training:** None anticipated.

4.  **Site approval and planning:** N/A


**REFERENCES**

None

**APPENDICES**

None